

## UNITED STATES DISTRICT COURT

for the

2022 Jul 15 PM 3:18

Eastern District of Virginia

\_\_\_\_ Alexandria \_\_\_\_ Division

Faisal Mahmud

Case No.

1:22CV 800 RDA/JFA

(to be filled in by the Clerk's Office)

*Plaintiff(s)*

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

George Mason University,  
Charles R Kreitzer, and Janette K Muir

Jury Trial: (check one)  Yes  No*Defendant(s)*

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Faisal Mahmud
Street Address	545 Triadelphia Way
City and County	Alexandria, Fairfax
State and Zip Code	Virginia-22312
Telephone Number	(757) 288-3945
E-mail Address	fmahm001@gmail.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Defendant No. 1

Name	George Mason University
Job or Title ( <i>if known</i> )	
Street Address	4400 University Dr
City and County	Fairfax, Fairfax
State and Zip Code	Virginia-22030
Telephone Number	(703) 993-2606
E-mail Address ( <i>if known</i> )	srochell@gmu.edu

## Defendant No. 2

Name	Charles R Kreitzer
Job or Title ( <i>if known</i> )	Executive Director for Online Operations
Street Address	420 Innovation Hall, MSN 6A7, 4400 University Drive
City and County	Fairfax, Fairfax
State and Zip Code	Virginia-22030
Telephone Number	(603) 707-7352
E-mail Address ( <i>if known</i> )	ckreitze@gmu.edu

## Defendant No. 3

Name	Janette K Muir
Job or Title ( <i>if known</i> )	Vice Provost, Academic Affairs
Street Address	MSN 1D9, 4400 University Drive
City and County	Fairfax, Fairfax
State and Zip Code	Virginia-22030
Telephone Number	(703) 993-8891
E-mail Address ( <i>if known</i> )	jmuir@gmu.edu

## Defendant No. 4

Name	
Job or Title ( <i>if known</i> )	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address ( <i>if known</i> )	

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is

Name	George Mason University
Street Address	4400 University Drive
City and County	Fairfax, Fairfax
State and Zip Code	Virginia 22030
Telephone Number	(703) 993-1000

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (*check all that apply*):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Other federal law (*specify the federal law*):



Relevant state law (*specify, if known*):



Relevant city or county law (*specify, if known*):

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

**A. The discriminatory conduct of which I complain in this action includes (check all that apply):**

<input type="checkbox"/>	Failure to hire me.
<input checked="" type="checkbox"/>	Termination of my employment.
<input type="checkbox"/>	Failure to promote me.
<input type="checkbox"/>	Failure to accommodate my disability.
<input type="checkbox"/>	Unequal terms and conditions of my employment.
<input checked="" type="checkbox"/>	Retaliation.
<input checked="" type="checkbox"/>	Other acts (specify): <u>Discrimination on the basis of race, color, religion, and national origin</u>

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

**B. It is my best recollection that the alleged discriminatory acts occurred on date(s)**

06/15/2020 to April 26, 2022, 05/4/2021, 11/05/2021, 12/09/2021, 12/14/2021, 01/29/2022 to 03/28/2022

**C. I believe that defendant(s) (check one):**

<input type="checkbox"/>	is/are still committing these acts against me.
<input checked="" type="checkbox"/>	is/are not still committing these acts against me.

**D. Defendant(s) discriminated against me based on my (check all that apply and explain):**

<input checked="" type="checkbox"/>	race	<u>Please see the attached document</u>
<input checked="" type="checkbox"/>	color	<u>Please see the attached document</u>
<input type="checkbox"/>	gender/sex	
<input checked="" type="checkbox"/>	religion	<u>Please see the attached document</u>
<input checked="" type="checkbox"/>	national origin	<u>Please see the attached document</u>
<input type="checkbox"/>	age (year of birth)	<u>(only when asserting a claim of age discrimination.)</u>
<input type="checkbox"/>	disability or perceived disability (specify disability)	

**E. The facts of my case are as follows. Attach additional pages if needed.**

- i. Defendant(s) failed to protect my civil rights and discriminated against me based on my race, color, religion, and national origin.
- ii. Defendant(s) threatened me when I wanted to file a complaint with HR. Defendant(s) asked me to settle things with them and NOT to go to HR. Defendant(s) retaliated against me.
- iii. Defendant(s) harassed, abused, and verbally charged me because of my religious belief.
- iv. Defendant(s) exhibited derogatory and unprofessional attitude and behavior in the workplace.

Continued on additional documents due to space constraint: "Section III. E: Details of the Complaint".

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*(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)*

#### IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)  
04/29/2022 (initial complaint was filed on 02/02/2022)

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B. The Equal Employment Opportunity Commission (check one):

has not issued a Notice of Right to Sue letter.

issued a Notice of Right to Sue letter, which I received on (date) 05/02/2022

*(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)*

C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

60 days or more have elapsed.

less than 60 days have elapsed.

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

I am seeking USD One Million (\$1,000,000) in monetary compensation for actual and general compensatory damages.

Continued on additional documents due to space constraint: "Section V: Relief".

## VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 07/15/2022

Signature of Plaintiff



Printed Name of Plaintiff

Faisal Mahmud

### B. For Attorneys

Date of signing: \_\_\_\_\_

Signature of Attorney

\_\_\_\_\_

Printed Name of Attorney

\_\_\_\_\_

Bar Number

\_\_\_\_\_

Name of Law Firm

\_\_\_\_\_

Street Address

\_\_\_\_\_

State and Zip Code

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

E-mail Address

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF VIRGINIA  
Alexandria DIVISION

FILED

2022 JUL 17 PM 3:17

**Faisal Mahmud**

Plaintiff(s),

v.

George Mason University, Charles R Kreitzer,  
and Janette K Muir

Civil Action Number: 1:22CV800  
RDA/JFA

Defendant(s).

**LOCAL RULE 83.1(M) CERTIFICATION**

**I declare under penalty of perjury that:**

**No attorney has prepared, or assisted in the preparation of Complaint for Employment Discrimination.  
(Title of Document)**

Faisal Mahmud

Name of *Pro Se* Party (Print or Type)

  
Signature of *Pro Se* Party

Executed on: 07/15/2022 (Date)

**OR**

**The following attorney(s) prepared or assisted me in preparation of \_\_\_\_\_.**  
**(Title of Document)**

(Name of Attorney)

(Address of Attorney)

(Telephone Number of Attorney)

Prepared, or assisted in the preparation of, this document

(Name of *Pro Se* Party (Print or Type))

Signature of *Pro Se* Party

Executed on: \_\_\_\_\_ (Date)

UNITED STATES DISTRICT  
COURT EASTERN DISTRICT OF  
VIRGINIA  
Alexandria DIVISION

Faisal Mahmud

Plaintiff(s),

v.

George Mason University,  
Charles R Kreitzer, and  
Janette K Muir

Defendant(s).

**Details about Pro Se Litigant:**

1. My name: Faisal Mahmud
2. My address: 545 Triadelphia Way, Alexandria, VA -22312
3. My phone number: 757-288-3945 (cell). My email is: fmahm001@gmail.com

**List of Documents Submitted**

1. Civil Cover Sheet
2. Complaint for Employment Discrimination
  - a. Additional Details for Section III.E: Details of Complaints
  - b. Additional Details for Section V: Relief
3. Ghostwriting Certification
4. EEOC Letter of Right to Sue

**DECLARATION**

I, the undersigned, declare under penalty of perjury that the statements made in the above information are true and correct to the best of my knowledge, information, and belief.

(sign)



07.15.2022  
Date